Res'd PCT/PTO 22 JUL 2004/5++ Dkt. #931- PCT- U

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DECLARATION AND POWER OF ATTORNEY

10/502307

As a below-named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

HUMAN MONOCLONAL ANTIBODY FAB FRAGMENTS DIRECTED AGAINST HCV E2 GLYCOPROTEIN AND ENDOWED WITH IN VITRO NEUTRALIZING ACTIVITY

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X	is attached	hereto or				
as Applic						_ and
was amended on			. (if applicable)			
have revie, as amende	wed and unde d by any amen	rstand the conte dment referred t	ents of the to above.	above-ić	lentified spe	ecification,
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atent or inve	ntor's certifica	te listed below	and have als	so identi	fied below a	any toreign
Prior Foreign Application(s)			Priority Claimed			
<u>C</u>	ountry	Filing Da	<u>ite</u>	Yes	No	
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	was amen Thave revie In as amende duty to distance application app	X is attached was filed of as Application Serial Nowas amended on was amended on was amended by any amended, as amended by any amended by any amended by application in accordance application in accordance at the control of the cont			x is attached hereto or was filed on as Application Serial No. was amended on	

And I hereby appoint:

Albert Wai-Kit Chan (Reg. No. 36,479) and Mark Elkins (Reg. No. 42,510)

Attorney, with full power of substitution and revocation, to prosecute this application, to make alterations and amendments therein, to receive the patent, to transact all business in the Patent and Trademark Office connected therewith and to file any International Applications which are based thereon under the provisions of the Patent Cooperation Treaty.

Please address all communications, and direct all telephone calls, regarding this application to

Albert Wai-Kit Chan Law Offices of Albert Wai-Kit Chan, LLC World Plaza, Suite 604 141-07 20th Avenue Whitestone, NY 11357

Tel: (718) 357-8836 Fax: (718) 357-8615

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first joint inventor: BURIONI, Roberto	
Inventor's signature:	
Citizenship: ITALY. Date of Signature: \ukerpulm 4 2004	
Citizenship: ITALY. Date of Signature: July 9 2004 Residence: Piazza Ferrari 22, 47 900 Rimini - ITALY	
Post Office Address: same as the residence address	_
Full name of sole or first joint inventor:	
Inventor's signature:	
Citizenship: Date of Signature:	
Residence:	
Post Office Address:	